

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mozak, Paul, , ,

Mailing Address 21174 Bridle Run

City
Northville

State
MI

Zip Code
48167-9605

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
SVP Finance & Chief Risk Offcr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 20 / 2019

Transaction ID : A777C90EE9CC945C9AAB

Amount of Each Receipt this Period

1300.00

☐ Memo Item

Payroll Deduction: \$100.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rossi, Lynda, , ,

Mailing Address 1066 Foxborough Dr

City
Williamston

State
MI

Zip Code
48895-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
EVP Strgy Govern & Pub Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 20 / 2019

Transaction ID : ACB30C079B3CA466C994

Amount of Each Receipt this Period

1300.00

☐ Memo Item

Payroll Deduction: \$100.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wells Jr, James, , ,

Mailing Address VA

City
Glen Allen

State
VA

Zip Code
23059

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Emergent

Occupation (for Individual)
President, Advantasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 20 / 2019

Transaction ID : A274A3C5544664CAEA62

Amount of Each Receipt this Period

1300.00

☐ Memo Item

Payroll Deduction: \$100.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3900.00